05/18/2007 10:36

Image# 27930729629

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND 103 POWELL COURT SUITE 200 ADDRESS (number and street) Check if different than previously **BRENTWOOD** TN 37027 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE A IS THIS NEW **AMENDED** C00347955 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 04 0 1 2007 04 30 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Penny Brake Type or Print Name of Treasurer Electronically Filed by Penny Brake 05 16 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND <sup>®</sup> D <sup>U</sup>D 0.4 0 1 2007 0.4 3 0 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand <sup>°</sup>2007 8122.84 January 1 (b) Cash on Hand at 22465.97 Begining of Reporting Period ..... 77451.00 108036.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 99916.97 116158.84 6(a) and 6(c) for Column B) ..... 11220.66 27462.53 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 88696.31 88696.31 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

(subtract Line 18(c) from Line 19) .....

LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND

0 1 3<sup>D</sup>0 м м 0 4 м м 0 4 2007 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 68806.00 98441.00 (i) Itemized (use Schedule A) ...... 8645.00 9595.00 (ii) Unitemized ..... (iii) TOTAL (add 77451.00 108036.00 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 77451.00 108036.00 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 77451.00 108036.00 12, 13, 14, 15, 16, 17, and 18(c)) ..... 20. Total Federal Receipts

77451.00

108036.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

	Total This Period	Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating  Expenditures	10.66	42.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	10.66	42.53
Transfers to Affiliated/Other Party	0.00	0.00
Committees Contributions to	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	5000.00	19000.00
Independent Expenditure	0.00	0.00
(use Schedule E)		
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To:  (a) Individuals/Persons Other Than Political Committees	0.00	0.00
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements	6210.00	8420.00
Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share		
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,	11220.66	27462.53
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	11220.00	27402.50
Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii)		
from Line 31)	11220.66	27462.53

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	77451.00	108036.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	77451.00	108036.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10.66	42.53
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	10.66	42.53

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 40		
	EMIZED RECEIPTS		or each category of the	(check only one)		
•••	LIMIZED RECEIT 13		Detailed Summary Page	X 11a 11b 11c 12		
Δ				13 14 15 16 17		
or	ly information copied from such Reports and St for commercial purposes, other than using the	name and ado	r not be sold or used by any personal distribution of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
$\angle$	LIFEPOINT HOSPITALS INC GOOD (	GOVERNME	ENT FUND			
A.	Full Name (Last, First, Middle Initial) Karen Amen			Date of Receipt		
	Mailing Address HC1 Box 1066-J			0 4 1 0 2 0 0 7		
	City State		Zip Code	Transaction ID: SA11A1.6220		
	Payson	AZ	85541	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Havasu Regional Med. Ctr.	Occupation RN/CNO	١			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		250.00	1		
	Other (specify) ▼		250.00			
В.	Full Name (Last, First, Middle Initial) M.A. Anaya, Sr.			Date of Receipt		
	Mailing Address 63 Lakeview Circle			0 4 2 4 2 0 0 7		
	City	State	Zip Code	Transaction ID: SA11A1.6183		
	Fort Morgan	CO	80701	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer Colorado Plains Medical Center	Occupation CEO	1			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		1000.00	1		
	Other (specify) ▼	0 0	1000.00			
<u>С</u> .	Full Name (Last, First, Middle Initial) Karen Anderson-Barrett			Date of Receipt		
	Mailing Address 4202 Farrar Avenue			0 4		
	City	State	Zip Code	Transaction ID: SA11A1.6277		
	Nashville	TN	37215	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		300.00		
	Name of Employer LifePoint Hospitals, Inc.	Occupation Attorney	1			
	Receipt For:		Year-to-Date <b>V</b>			
	Primary General		200.00	1		
	Other (specify) ▼		300.00			
s	UBTOTAL of Receipts This Page (optional)			1550.00		
$\vdash$	<u> </u>		•			
T	OTAL This Period (last page this line number of					

				1		
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 40			
	EMIZED RECEIPTS		or each category of the	(check only one)		
•••	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12		
				13 14 15 16 17		
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)					
$\rangle$	LIFEPOINT HOSPITALS INC GOOD GO	OVERNME	ENT FUND			
Α.	Full Name (Last, First, Middle Initial) Robert Baker			Date of Receipt		
	Mailing Address 1126 Stonebridge Park			04 19 2007		
	City	State	Zip Code	Transaction ID: SA11A1.6427		
	Franklin	TN	37069	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer LifePoint Hospitals, Inc.	Occupation Reimburs	n sement Manager			
	Receipt For:		e Year-to-Date ▼			
	Primary General			1		
	Other (specify)	0 0	250.00			
В.	Full Name (Last, First, Middle Initial) Bruce Baldwin			Date of Receipt		
	Mailing Address 6459 White Blossom Cir	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City	State	Zip Code	Transaction ID: SA11A1.6204		
	<u>Jacksonville</u>	FL	32258	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer Putnam Community Medical	Occupation	n	7		
	Cent.	CEO				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		1000.00	1		
	Other (specify) ▼		1000.00	]		
<u> </u>	Full Name (Last, First, Middle Initial)			Date of Pessint		
<b>U</b> .	Chris Bangerter  Mailing Address 411 Dahlia Drive			Date of Receipt		
	Walling Address 411 Dallila Drive			04 13 2007		
	City	State	Zip Code	Transaction ID: SA11A1.6278		
	Brentwood	TN	37027	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer LifePoint Hospitals, Inc.	Occupation Attorney	n			
	Receipt For:		e Year-to-Date ▼	7		
	Primary General	-	F00.00	1		
	Other (specify) ▼		500.00	]		
				1750.00		
s	UBTOTAL of Receipts This Page (optional)		·····	1750.00		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 40
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	EIVIIZED RECEIP 13		Detailed Summary Page	X 11a
				13 14 15 16 17
Ai or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and ado	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$  \rangle$	LIFEPOINT HOSPITALS INC GOOD GO	OVERNME	NT FUND	
$\angle$				
	Full Name (Last, First, Middle Initial)			<b>1 5 . . . . .</b> .
Α.				Date of Receipt
	Mailing Address 3204 Amberwood Circle			04 16 2007
	City	State	Zip Code	Transaction ID: SA11A1.6299
	Nashville	TN	37221	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		230.00
	Name of Employer LifePoint Hospitals, Inc.	Occupation	n sement Manager	
	Receipt For:		Year-to-Date <b>V</b>	_
	Primary General	Aggregate	Total to Date V	1
	Other (specify)		230.00	
		0 0	0 0 0 0 0 0 0	
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 2517 St. James Drive			0 4 1 0 Y Y Y Y Y Y Y
	City	State	Zip Code	
	Franklin	TN	37064	Transaction ID: SA11A1.6221
		III	37004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1500.00
				_
	Name of Employer LifePoint Hospitals, Inc.	Occupation		
		Division (	Year-to-Date ▼	
	Receipt For: Primary General	Aggregate	Teal-10-Dale ▼	1
	Other (specify)	' '	1500.00	
		0 0		
_	Full Name (Last, First, Middle Initial)			2. (2
C.	Steven Bradley Boggus  Mailing Address 139 County Boad 114			Date of Receipt
	Mailing Address 139 County Road 114			04 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.6241
	Winfield	AL	35594	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			250.00
	Name of Employer	Occupation	1	_
	Name of Employer Northwest Medical Center		•	
	Receipt For:	CFO Aggregate	Year-to-Date ▼	
	Primary General		050.00	1
Other (specify) ▼			250.00	
_				
				1980.00
S	UBTOTAL of Receipts This Page (optional)		<b>)</b>	1300.00
_	OTAL This Period (last page this line number or	dv)		
	VIAL THIS FERIOD HAS DADE HIS THE HUMDER OF	IIV )		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 40
TEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12
Assistance and force and Board 100	-1	and he had an area of the same	13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		· · · · · · · · · · · · · · · · · · ·	
LIFEPOINT HOSPITALS INC GOOD G	OVERNME	NT FUND	
/ === === =============================	, 0 , 5 , 11 , 11 , 12		
Full Name (Last, First, Middle Initial)			
A. Karen Bowling			Date of Receipt
Mailing Address 127 Orlando Street			04 16 2007
City	State	Zip Code	Transaction ID: SA11A1.6353
Beckley	WV	25801	Amount of Each Receipt this Period
		25001	
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Raleigh General Hospital	Occupation		
	Presiden		4
Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)	' '	1000.00	
Citici (Specify)	1 1	0 0 0 0 0 0 0	
Full Name (Last, First, Middle Initial)			
3. Margie Brusseau			Date of Receipt
Mailing Address 1030 Cedar Springs Ro	M M / D D / Y Y Y Y		
011	04 24 2007		
City	State	Zip Code	Transaction ID: SA11A1.6200
Athens	TN	37303	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		400.00
rederai politicai committee.			
Name of Employer Athens Regional Med. Ctr.	Occupation		
	RN, CNC		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify)		400.00	
Cirier (specify)		1 1 1 1 1 1 1	
Full Name (Last, First, Middle Initial)			
Jack Buck			Date of Receipt
Mailing Address 866 Gobbler Springs La	ane		M M / D D / Y Y Y Y
Cit.	04-1-	7in Oada	04 19 2007
City	State TN	Zip Code	Transaction ID: SA11A1.6429
Lawrenceburg	TIN	38464	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
·			
Name of Employer Crockett Hospital	Occupation	n	
	CEO	<u> </u>	
Receipt For:	Aggregate	e Year-to-Date ▼	. [
Primary General Other (specify) ▼		500.00	
☐ Other (specify) ♥	0 0	1 1 1 1 1 1 1	
SUBTOTAL of Receipts This Page (optional)			1900.00
(optional)		······································	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 10 / 40
			or each category of the	(check only one)	- —
••	EMIZED REGEN 10		Detailed Summary Page	X 11a 11b	11c   12 15   16   17
۸۰	w information conicd from such Bonorts and St	ntomonto mo	ret he cold or wood by any norse	n for the purpose of solic	
or	y information copied from such Reports and Sta for commercial purposes, other than using the r	solicit contributions from	such committee.		
	NAME OF COMMITTEE (In Full)				
$ \rangle$	LIFEPOINT HOSPITALS INC GOOD G				
	Full Name (Last, First, Middle Initial)				
Α.	Donna S. Carter			Date of Receipt	
	Mailing Address 1120 Claiborne Avenue			04 13	
	City	State	Zip Code	Transaction ID: S	
	Minden	LA	71055	Amount of Each Re	
	FEC ID number of contributing			7 Amount of Edon He	<del></del>
	federal political committee.	C			300.00
	Name of Employer Minden Medical Center	Occupation CNO	1		
	Receipt For:		e Year-to-Date ▼	_	
	Primary General	Aggregate	: Teal-to-Date V		
	Other (specify)		300.00		
		0 0			
_	Full Name (Last, First, Middle Initial)				
В.	Reba Lowery Celsor			Date of Receipt	
	Mailing Address 5600 Country Drive Uni	0 4 1 6			
	011. 7. 0. 1				
	City	State TN	Zip Code	Transaction ID: S	
	Nashville	IIV	37172	Amount of Each Re	eelpt this Period
	FEC ID number of contributing federal political committee.	C			240.00
	- Todoral political committee:				
	Name of Employer LifePoint Hospitals, Inc.	Occupation			
	- <u> </u>		Clinical Operations		
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼		
	Other (specify)	' '	240.00		
	Cure (epocis) 🔻	0 0	1 1 1 1 1 1 1		
	Full Name (Last, First, Middle Initial)				
C.	William Chaney			Date of Receipt	
	Mailing Address 5914 Old Harding Pike			0 4 1 6	
	City	State	Zip Code	Transaction ID: S	
	Nashville	TN	37205	Amount of Each Re	
			07203	Amount of Lacif Re	ceipt this renou
	FEC ID number of contributing federal political committee.	C			300.00
	Name of Employer LifePoint Hospitals, Inc.	Occupation			
			nternal Audit		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)		300.00		
	care (epocinj) 🔻	0 0	1 1 1 1 1 1 1		
Г					
s	UBTOTAL of Receipts This Page (optional)				840.00
$\vdash$	,				
T	OTAL This Period (last page this line number o	nly)	<b>&gt;</b>		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 40	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
••	EMIZED RECEIL 10		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16	7 17
Δr	ny information copied from such Reports and St	atomente may	unot he sold or used by any nerso		17
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
$  \rangle$	LIFEPOINT HOSPITALS INC GOOD G				
$\angle$					
Α.	Full Name (Last, First, Middle Initial) Michael Clark			Date of Respire	
Α.	Mailing Address 246 W Main Street			Date of Receipt	
	Walling Address 240 W Walli Street			04 05 2007	
	City	State	Zip Code	Transaction ID: SA11A1.6206	
	Georgetown	KY	40324	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		1000.00	
	federal political committee.	C		1000.00	
	Name of Employer	Occupation	 n	┪	
	Name of Employer Georgetown Community Hosp- ital	CEO			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		1000.00		
	Other (specify)		1000.00		
	Full Name (Least First Addulla 1975)			_	
В.	Full Name (Last, First, Middle Initial) Kenneth Cochran			Date of Receipt	
	Mailing Address 712 Ponderosa Place			M M / D D / Y Y Y Y	
				04 24 2007	
	City	State	Zip Code	Transaction ID: SA11A1.6181	
	Fort Morgan	<u>CO</u>	80701	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		400.00	
	federal political committee.				
	Name of Employer Colorado Plains Medical	Occupation	n	7	
	Center	CNO			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		400.00		
	Other (specify)	-	0 0 0 0 0 0 0		
_	Full Name (Last, First, Middle Initial)				
C.	John Cude			Date of Receipt	
	Mailing Address 1449 Charleston Lane			04 16 2007	
	City	State	Zip Code	Transaction ID: SA11A1.6307	
	Columbia	TN	38401	Amount of Each Receipt this Period	
	FEC ID number of contributing		00101		
	federal political committee.	C		296.00	
	Name of Franksia	10			
	Name of Employer LifePoint Hospitals, Inc.	Occupation	n sement Director		
	Receipt For:		e Year-to-Date ▼	-	
	Primary General	7.99.094.0		1	
Other (specify) ▼			296.00		
				1606.00	
S	UBTOTAL of Receipts This Page (optional)	······	······································	1696.00	_
T	OTAL This Period (last page this line number of	only)			

0	CHEDIII E A /EEC Eoum 2V)			FOR LINE NUMBER: PAGE 12 / 40		
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)		
IT	EMIZED RECEIPTS	or each category of the		X 11a 11b 11c 12		
			Detailed Summary Page			
				13 14 15 16 17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
$\rangle$	LIFEPOINT HOSPITALS INC GOOD G	OVERNME	NT FUND			
Α.	Full Name (Last, First, Middle Initial) Sandra Culler			Date of Receipt		
	Mailing Address 1301 McDowell Street			04 24 2007		
	City	State	Zip Code	Transaction ID: SA11A1.6191		
	Richlands	VA	24641	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Clinch Valley Medical Cen- ter	Occupation CNO	1			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1		
	Other (specify) ▼	0 0	250.00			
В.	Full Name (Last, First, Middle Initial) Craig Daniels			Date of Receipt		
	Mailing Address 74 E 900 N			0 4 1 6 2 0 0 7		
	City	State	Zip Code	Transaction ID: SA11A1.6336		
	Price	UT	84501	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		300.00		
	Name of Employer Castleview	Occupation CFO	1			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼		300.00			
_	Full Name (Last, First, Middle Initial)					
C.	David B. Darden			Date of Receipt		
	Mailing Address 210 Litton Avenue, Apt.	#23		04 13 2007		
	City	State	Zip Code	Transaction ID: SA11A1.6245		
	Richlands	VA	24641	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer Clinch Valley Medical Ctr.	Occupation Healthcar	n re Executive			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General			1		
	Other (specify)		1000.00			
	UPTOTAL of Descripto Title Des			1550.00		
L	UBTOTAL of Receipts This Page (optional)		······			

PAGE 13 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Date of Receipt Melissa Davis Mailing Address 1935 Ed Davis Lane 0.4 2007 16 City State Zip Code Transaction ID: SA11A1.6308 Florala Αl 36442 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer Andalusia Regional Hospit-Occupation CNO Receipt For: Aggregate Year-to-Date ▼ General Primary 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Patty Doles Date of Receipt Mailing Address 1302 Drake Drive 0.4 13 2007 City State Zip Code Transaction ID: SA11A1.6246 Minden LA 71055 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Name of Employer Minden Medical Center Occupation **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) C. Charlotte Dupre Date of Receipt Mailing Address 530 South Second Street 0.4 13 2007 Zip Code City State Transaction ID: SA11A1.6279 Eunice 75305 Amount of Each Receipt this Period FEC ID number of contributing 750.00 C federal political committee. Name of Employer Acadian Medical Center Occupation CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 1800.00 SUBTOTAL of Receipts This Page (optional) .....

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 / 40			
IT	EMIZED RECEIPTS	or each category of the		(check only one)  X 11a 11b 11c 12			
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$			
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions			
$\setminus$	NAME OF COMMITTEE (In Full)						
	LIFEPOINT HOSPITALS INC GOOD G	OVERNME	NT FUND				
Α.	Full Name (Last, First, Middle Initial) William S. Duvall			Date of Receipt			
	Mailing Address 1019 Whitley Place			04 13 2007			
	City	State	Zip Code	Transaction ID: SA11A1.6248			
	Hendersonville	TN	37075	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		270.00			
	Name of Employer LifePoint Hospitals, Inc.		Ethics & Compliance				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00				
В.	Full Name (Last, First, Middle Initial) Stephen H. East			Date of Receipt			
	Mailing Address 800 Main Street	04 10 7 2007					
	City	State	Zip Code	Transaction ID: SA11A1.6224			
	Ville Platte	<u>LA</u>	70586	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		250.00			
	Name of Employer Ville Platte Medical Ctr.	Occupation CEO	1				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	250.00				
<u>С</u> .	Full Name (Last, First, Middle Initial) Jim Edmondson			Date of Receipt			
	Mailing Address 500 Hunter Lane			04 19 2007			
	City	State	Zip Code	Transaction ID: SA11A1.6432			
	Pulaski	TN	38478	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1000.00			
	Name of Employer Hillside Hospital	Occupation CEO	١				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00				
s	UBTOTAL of Receipts This Page (optional)			1520.00			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 15/40	
	EMIZED RECEIPTS	or each category of the	(check only one)			
•••	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b	11c   12	
_				13 14	15 16 17	
Ar	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and ado	r not be sold or used by any perso Iress of any political committee to	n for the purpose of solic solicit contributions from	citing contributions is such committee.	
	NAME OF COMMITTEE (In Full)					
$  \rangle$	LIFEPOINT HOSPITALS INC GOOD GO					
		V = 1 11 11 11 1				
_	Full Name (Last, First, Middle Initial)					
A.	Sue A. Eubanks			Date of Receipt		
	Mailing Address 5625 Cedar Rock Drive			0 4 1 6		
	City	State	Zip Code	Transaction ID: S		
	Nashville	TN	37211	Amount of Each R		
			STETT	Amount of Lacif N	eceipi illis Period	
	FEC ID number of contributing federal political committee.	C			240.00	
	LifePoint Hospifals Inc	Occupation				
			sement Manager			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼		240.00			
	Carlor (opeony) 🔻		1 1 1 1 1 1 1 1			
_	Full Name (Last, First, Middle Initial)					
В.	Richard Flores			Date of Receipt		
	Mailing Address 9439 Timber Ridge Court	M M / D D	/ Y Y Y Y			
				04 16		
	City	State	Zip Code	Transaction ID: SA11A1.6311		
	Brentwood	TN	37027	Amount of Each R	eceipt this Period	
	FEC ID number of contributing federal political committee.	С			800.00	
	rederal political committee.					
	Name of Employer LifePoint, Hospitals, Inc.	Occupation				
			nue Cycle Operations			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		800.00			
	Other (specify)					
	Full Name (Last, First, Middle Initial)					
C.				Date of Receipt		
	Mailing Address 10 Mountain Meadows Es	states		M M / D D		
	011	01-1-	7'- O-d-	04 13		
	Channanavilla	State WV	Zip Code	Transaction ID: S		
	Chapmansville	VVV	25508	Amount of Each R	eceipt this Period	
	FEC ID number of contributing federal political committee.	C			750.00	
	·					
	Name of Employer Logan Regional Medical Ce-	Occupation	1			
	nter	CEO				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify)	' '	750.00			
	Other (Specify) \	0 0	0 0 0 0 0 0 0			
Г	<u>l</u>					
	UBTOTAL of Receipts This Page (optional)				1790.00	
$\vdash$						
_	OTAL This Period (last page this line number only					

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 16 / 40	
ITEMIZED RECEIPTS			or each category of the	(check only one)	1 🗆	
••			Detailed Summary Page	X 11a 11b 1	11c   12 15   16   17	
Δr	ay information copied from such Reports and St	atomonte may	, not be sold or used by any perso			
or	ny information copied from such Reports and St for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from	such committee.	
	NAME OF COMMITTEE (In Full)					
$  \rangle$	LIFEPOINT HOSPITALS INC GOOD G	OVERNME	ENT FUND			
$\angle$						
Α.	Full Name (Last, First, Middle Initial)			Date of Receipt		
Α.	George E. French, III  Mailing Address 1106 Broadway			M M / D D	/ Y Y Y Y	
	Walling Address 1100 Bloadway			0 4 1 3	2007	
	City	State	Zip Code	Transaction ID: SA	11A1.6249	
	Minden	LA	71055	Amount of Each Re	ceipt this Period	
	FEC ID number of contributing				1000.00	
	federal political committee.	C			1000.00	
	Name of Employer	Occupation	 n	$\dashv$		
	Name of Employer Minden Medical Center	CEO				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		1000.00	1		
	Other (specify)		1000.00			
В.	Full Name (Last, First, Middle Initial) Donald Gavin II			Date of Receipt		
	Mailing Address 1967 Alf Harris Road	M M / D D	/ <b>Y Y Y Y Y</b>			
		0 4 1 7	2007			
	City State		Zip Code	Transaction ID: SA11A1.6399		
	Prospect	TN	38477	Amount of Each Re	ceipt this Period	
	FEC ID number of contributing	C			500.00	
	federal political committee.					
	Name of Employer Hillside	Occupation	n			
	Hillside	CFO				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		500.00			
	Ctrief (specify) \	1	0 0 0 0 0 0	J.		
	Full Name (Last, First, Middle Initial)					
C.	James Geist			Date of Receipt		
	Mailing Address 2690 Paseo Verde			0 4 0 5	2007	
	City	State	Zip Code			
	Fort Mohave	AZ	86406	Transaction ID: SA  Amount of Each Re		
			00400	Amount of Lacif Re	Jeipt this Feriod	
	FEC ID number of contributing federal political committee.	C			400.00	
	· · · · · · · · · · · · · · · · · · ·	10				
	Name of Employer Havasu Regional Medical	Occupation COO	n .			
	Center Receipt For:		e Year-to-Date ▼	$\dashv$		
	Primary General	7.99.094.0	Tour to Bate V	1		
	Other (specify) ▼	1	400.00			
					1000.00	
S	UBTOTAL of Receipts This Page (optional)	<u></u>	<u></u>		1900.00	
T	OTAL This Period (last page this line number of					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBE	ER: PAGE 17/40
	EMIZED RECEIPTS		or each category of the	(check only one)	
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b	$\vdash$ $\vdash$ $\vdash$
_				13 14	15 16 17
Ar	ly information copied from such Reports and Sta for commercial purposes, other than using the n	itements may lame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of s solicit contributions fr	oliciting contributions rom such committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	LIFEPOINT HOSPITALS INC GOOD G	OVERNME	NT FUND		
Α.	Full Name (Last, First, Middle Initial) Paul D. Gilbert			Date of Receipt	
	Mailing Address 2414 Valley Brook Road	d		M M / D	D / Y Y Y Y
					16 2007
	City	State	Zip Code		: SA11A1.6313
	Nashville	TN	37215	Amount of Each	n Receipt this Period
	FEC ID number of contributing federal political committee.	C			2500.00
	Name of Employer	Occupation	า	$\dashv$	
	Name of Employer LifePoint Hospitals, Inc.		eral Counsel		
	Receipt For:		Year-to-Date ▼		
	Primary General		0500.00		
	Other (specify) ▼		3500.00		
_					
В.	Full Name (Last, First, Middle Initial) Sheryl Glasscock			Date of Receipt	
	Mailing Address 20 Wondering Woods				D / Y Y Y Y
	City	State	Zip Code		24 2007
	Somerset	KY	42503		: SA11A1.6194 n Receipt this Period
			42300	Amount of Laci	Theceipt this Fellou
	FEC ID number of contributing federal political committee.	C			250.00
		10			
	Name of Employer Lake Cumberland Regional	Occupation CNO	1		
	Receipt For:		Year-to-Date ▼	_	
	Primary General	7.99.094.0			
	Other (specify) ▼		250.00		
_				'	
C.	Full Name (Last, First, Middle Initial) Nancy Godby			Date of Receipt	
	Mailing Address Rt 1 Box 168				17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code		: SA11A1.6401
	Chapmanville	WV	25508		Receipt this Period
	FEC ID number of contributing				<del> </del>
	federal political committee.	C			400.00
	Name of Employer Logan Regional	Occupation COO	1		
	Receipt For:		Year-to-Date <b>V</b>	7	
	Primary General			1	
	Other (specify) ▼		400.00		
_					
					2150.00
s	UBTOTAL of Receipts This Page (optional)		······		3150.00

PAGE 18 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Date of Receipt Susan K. Goetzinger Mailing Address 4220 Windsong Drive 0.4 2007 05 City State Zip Code Transaction ID: SA11A1.6211 Riverton WY 82501 Amount of Each Receipt this Period FEC ID number of contributing 850.00 C federal political committee. Name of Employer Riverton Occupation **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) B. William Gracey Date of Receipt Mailing Address 14 Wynstone 0.4 05 2007 City Zip Code State Transaction ID: SA11A1.6203 <u>Nashville</u> TN 37215 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation COO Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) Full Name (Last, First, Middle Initial) C. Julia Grove Date of Receipt Mailing Address 3865 Plymouth Drive 0.4 16 2007 Citv State Zip Code Transaction ID: SA11A1.6314 Paducah KY 42001 Amount of Each Receipt this Period FEC ID number of contributing 400.00 C federal political committee. Name of Employer Jackson Purchase Med Ctr Occupation CNO Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 3250.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 19 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page \_17** 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Date of Receipt Paul Hannah Mailing Address 8202 Foxview Court 0.4 2007 13 City State Zip Code Transaction ID: SA11A1.6281 **Brentwood** ΤN 37027 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation SVP Development Aggregate Year-to-Date ▼ Receipt For: Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Randolph Harrison Date of Receipt Mailing Address 3552 Saddle Rock Road 0.4 13 2007 City Zip Code State Transaction ID: SA11A1.6251 Las Cruces NM 88011 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Name of Employer Memorial Med. Ctr Las Cru-Occupation **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) C. David Henson Date of Receipt Mailing Address PO Box 2064 0.4 19 2007 Zip Code City State Transaction ID: SA11A1.6435 Elko NV 89803 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Northeastern Nevada Regio-Occupation CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2750.00 SUBTOTAL of Receipts This Page (optional) .....

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 40
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12
	.,			13 14 15 16 17
or	ny information copied from such Reports and State for commercial purposes, other than using the r	on for the purpose of soliciting contributions solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)			
$ \rangle$	LIFEPOINT HOSPITALS INC GOOD G	OVERNME	NT FUND	
	Full Name (Last, First, Middle Initial)			
A.	Paul Herzog			Date of Receipt
	Mailing Address 920 Raleigh Road			M M / D D / Y Y Y Y
	City	Ctata	7in Code	04 16 2007
	City Las Cruces	State NM	Zip Code 88005	Transaction ID: SA11A1.6315
		INIVI	00003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Memorial Medical Center	Occupation	1	
	Receipt For:		Year-to-Date <b>V</b>	
	Primary General	00 0		1
	Other (specify) ▼	0 0	1000.00	
_				
В.	Full Name (Last, First, Middle Initial) Randall Hoover			Date of Receipt
	Mailing Address 302 Shadow Wood Driv	'e		M M / D D / Y Y Y
	-		7. 0. 1	04 19 2007
	City	State	Zip Code	Transaction ID: SA11A1.6436
	Palestine	TX	75801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Palestine Regional Medical	Occupation CEO	1	
	Ctr Receipt For:	_	Year-to-Date <b>V</b>	_
	Primary General	7.99.094.0		1
	Other (specify)		250.00	
_				
C.	Full Name (Last, First, Middle Initial) J. Gregory Hostettler			Date of Receipt
	Mailing Address 667 Watson Branch Dri	ve		M M / D D / Y Y Y Y
	Cit.	Ctata	7in Onda	04 13 2007
	City Franklin	State TN	Zip Code 37064	Transaction ID: SA11A1.6282  Amount of Each Receipt this Period
	FEC ID number of contributing		37004	
	federal political committee.	С		850.00
	Name of Employer	Occupation	1	
	LifePoint Corporate		ials Management	
	Receipt For:		Year-to-Date ▼	
	Primary General	1	850.00	1
	Other (specify)			J
	I			
s	UBTOTAL of Receipts This Page (optional)			2100.00
			•	
Ιт	OTAL This Period (last page this line number of	nlv)		

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 40		
	EMIZED RECEIPTS		or each category of the	(check only one)		
11	EIVIIZED NECEIP I 3		Detailed Summary Page	X 11a 11b 11c 12		
_			, ,	13 14 15 16 17		
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)					
$\rangle$	LIFEPOINT HOSPITALS INC GOOD GO	OVERNME	ENT FUND			
Α.	Full Name (Last, First, Middle Initial) Jess N. Judy			Date of Receipt		
	Mailing Address 112 Chatsworth Drive			04 10 7 2007		
	City	State	Zip Code	Transaction ID: SA11A1.6227		
	Nashville	TN	37215	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		2250.00		
	Name of Employer LifePoint Hospitals, Inc.	Occupation Division	n President			
	Receipt For:	Aggregate	e Year-to-Date ▼	7		
	Primary General			1		
	Other (specify) ▼	0 0	3250.00			
В.	Full Name (Last, First, Middle Initial) Robert Klein			Date of Receipt		
	Mailing Address 76 Blueridge Trace			0 4 1 3 2 0 0 7		
	City	State	Zip Code	Transaction ID: SA11A1.6283		
	Hendersonville	TN	37075	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		3000.00		
	Name of Employer LifePoint Hospitals, Inc.	Occupation	n	7		
	LifePoint Hospitals, Inc.	Division I	President			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General			1		
	Other (specify) ▼		4000.00			
<u> </u>	Full Name (Last, First, Middle Initial) Jone Koford			Date of Receipt		
	Mailing Address 1493 Willowbrooke Circle	е		0 4 1 3 2 0 0 7		
	City	State	Zip Code	Transaction ID: SA11A1.6284		
	Franklin	TN	37069	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		2500.00		
	Name of Employer LifePoint Hospitals, Inc.	Occupation Healthca	n re Executive - Division Pres.			
	Receipt For:	Aggregate	e Year-to-Date ▼	7		
	Primary General			1		
	Other (specify) ▼		3500.00	]		
S	UBTOTAL of Receipts This Page (optional)			7750.00		
$\vdash$	o			-		

PAGE 22 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Neil Kunkel Date of Receipt Mailing Address 300 Jackson Blvd 0.4 2007 19 City State Zip Code Transaction ID: SA11A1.6437 Nashville ΤN 37205 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation Attorney Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Don Larson Date of Receipt Mailing Address 492 Broadview Drive 0.4 19 2007 City State Zip Code Transaction ID: SA11A1.6439 **Nashville** TN 37220 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation Director Constituency Satisfaction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) C. Mary Jo Lewis Date of Receipt Mailing Address 3304 State Route 1529 East 0.4 16 2007 City State Zip Code Transaction ID: SA11A1.6368 <u>Fult</u>on KY 42041 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Jackson Purchase Med Ctr Occupation CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2300.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 23 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** <u>|</u>17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Date of Receipt Jeffery Manley Mailing Address 2435 S 190 East 0.4 2007 16 City State Zip Code Transaction ID: SA11A1.6340 Price UT 84501 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Castleview Occupation CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Don Mason Date of Receipt Mailing Address 8209 Vaden Drive 0.4 13 2007 City State Zip Code Transaction ID: SA11A1.6285 **Brentwood** TN 37027 Amount of Each Receipt this Period FEC ID number of contributing C 240.00 federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation Director - Ethics & Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) C. Michael Mayeux Date of Receipt Mailing Address 34 Oak Place 04 24 2007 Zip Code Citv State Transaction ID: SA11A1.6193 New Iberia 70563 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Name of Employer Teche Occupation **CFO** Receipt For: Aggregate Year-to-Date ▼ General Primary 750.00 Other (specify) 1490.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 24 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Date of Receipt Donald McDaniel Mailing Address Rt 4 Box 32AA 0.4 17 2007 City State Zip Code Transaction ID: SA11A1.6416 Chapmanville W۷ 25508 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Logan Regional Occupation **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Timothy W. McGill Date of Receipt Mailing Address 221 Bussell Street 0.4 16 2007 City Zip Code State Transaction ID: SA11A1.6341 Livingston TN 38570 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Livingston Regional Hospi-Occupation CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) C. James McGonnell Date of Receipt Mailing Address 8495 Florence Cove Road 04 05 2007 Citv State Zip Code Transaction ID: SA11A1.6214 St. Augustine FI 32092 Amount of Each Receipt this Period FEC ID number of contributing 450.00 C federal political committee. Name of Employer Putnam Community Med. Ctr. Occupation **CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 1950.00 SUBTOTAL of Receipts This Page (optional) .....

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 25/40		
			Use separate schedule(s) or each category of the	(check only one)			
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b	11c 12		
				13 14	15 16 17		
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of solici solicit contributions from	ting contributions such committee.		
$\overline{}$	NAME OF COMMITTEE (In Full)						
$\rangle$	LIFEPOINT HOSPITALS INC GOOD GO	OVERNME	NT FUND				
۹.	Full Name (Last, First, Middle Initial) Michael J. Meadows			Date of Receipt			
	Mailing Address 4712 E 250 S			04 / 10	2007		
	City	State	Zip Code	Transaction ID: SA			
	Knox	IN	46534	Amount of Each Re	ceipt this Period		
	FEC ID number of contributing federal political committee.	C			1000.00		
	Name of Employer Starke Memorial Hospital	Occupation CEO	1				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General		1000.00	1			
	Other (specify) ▼		1000.00	J			
3.	Full Name (Last, First, Middle Initial) Mark Medley			Date of Receipt			
	Mailing Address 419 Houston Oaks Drive			04 / 24	2007		
	City	State	Zip Code	Transaction ID: SA	A11A1.6188		
	<u>Paris</u>	KY	40361	Amount of Each Re	ceipt this Period		
	FEC ID number of contributing federal political committee.	С			1000.00		
	Name of Employer Bourbon	Occupation CEO	1				
	Receipt For:		Year-to-Date ▼	$\dashv$			
	Primary General	riggregate		1			
	Other (specify) ▼	0 0	1000.00				
`	Full Name (Last, First, Middle Initial) Greg Moore			Date of Receipt			
<b>J</b> .	Mailing Address 230 Stonewall Drive			M M / D D	/ <b>Y Y Y Y Y</b>		
				04 17	2007		
	City	State	Zip Code	Transaction ID: SA			
	Russellville	KY	42276	Amount of Each Re	ceipt this Period		
	FEC ID number of contributing federal political committee.	C			1000.00		
	Name of Employer Logan Memorial Hospital	Occupation CEO	1				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		1000.00				
9	UBTOTAL of Receipts This Page (optional)				3000.00		
_	ODITAL OF HECEIPES THIS Fage (Optional)		······································	-			
T	FOTAL This Period (last page this line number only)						

TOTAL This Period (last page this line number only) .....

PAGE 26 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page \_17** 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Date of Receipt A. Dirk Morgan Mailing Address 247 Deer Creek 0.4 2007 16 City State Zip Code Transaction ID: SA11A1.6371 **Mayfield** KY 42066 Amount of Each Receipt this Period FEC ID number of contributing 750.00 C federal political committee. Name of Employer Jackson Purchase Med Ctr Occupation **CFO** Receipt For: Aggregate Year-to-Date ▼ General Primary 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Samantha Mullins Date of Receipt Mailing Address PO Box 1467 17 0.4 2007 City Zip Code State Transaction ID: SA11A1.6418 Chapmanville WV 25508 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Name of Employer Logan Regional Medical Ce-Occupation CNO Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) C. Norman Nichols Date of Receipt Mailing Address 1203 College Street 04 13 2007 Zip Code Citv State Transaction ID: SA11A1.6261 Cleveland MS 38732 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Bolivar Medical Center Occupation CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2150.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 27 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Date of Receipt Thomas O'Dell Mailing Address 1024 Cobbler Ct. 0.4 2007 13 City State Zip Code Transaction ID: SA11A1.6289 Nashville ΤN 37221 Amount of Each Receipt this Period FEC ID number of contributing 860.00 C federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation VP Capital and Constr. Aggregate Year-to-Date ▼ Receipt For: Primary General 860.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brad Owens Date of Receipt Mailing Address 1014 Crimson Clover Drive 0.4 10 2007 City State Zip Code Transaction ID: SA11A1.6233 **Brentwood** TN 37027 Amount of Each Receipt this Period FEC ID number of contributing C 1500.00 federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation Division CFO Receipt For: Aggregate Year-to-Date V Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Debbie Pace Date of Receipt Mailing Address PO Box 120 04 17 2007 Zip Code Citv State Transaction ID: SA11A1.6419 Russellville ΑL 35653 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Russellville Hosp & Lakel-Occupation Associate Administrator and Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2610.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 28 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page \_17** 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Date of Receipt Terry Panter Mailing Address 107 Jade Court 0.4 2007 19 City State Zip Code Transaction ID: SA11A1.6441 Rockvale ΤN 37153 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation Reimbursement Manager Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert L. Parrish Date of Receipt Mailing Address 222 Prospect Avenue 0.4 13 2007 City Zip Code State Transaction ID: SA11A1.6290 Franklin TN 37064 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation VP - Development Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Michael Patterson Date of Receipt Mailing Address 1094 Lafayette Street 04 24 2007 City Zip Code State Transaction ID: SA11A1.6182 Sandy UT 84094 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Colorado Plains Medical Occupation **CFO** Center Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 29 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Ira Lee Perry, III Date of Receipt Mailing Address 510 Hampton Heights Lane 0.4 2007 16 City State Zip Code Transaction ID: SA11A1.6318 Franklin ΤN 37064 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation Material Management Director Aggregate Year-to-Date ▼ Receipt For: Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Allen Peters Date of Receipt Mailing Address 267 S Castlewood Drive 0.4 16 2007 City State Zip Code Transaction ID: SA11A1.6343 Selma ΑL 36701 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Name of Employer Vaughan Regional Med Ctr Occupation COO Receipt For: Aggregate Year-to-Date V Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) C. Thomas Pezanosky, Jr. Date of Receipt Mailing Address 1192 McCoury Lane 04 16 2007 Citv State Zip Code Transaction ID: SA11A1.6319 Spring Hill TN Amount of Each Receipt this Period FEC ID number of contributing 240.00 C federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation Reimbursement Director Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 940.00 SUBTOTAL of Receipts This Page (optional) .....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 40 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GO	OVERNME	ENT FUND	
<b>A.</b>	Full Name (Last, First, Middle Initial) Roxana Pool Mailing Address 401 N. High Street  City Winchester  FEC ID number of contributing federal political committee.  Name of Employer Southern Tennessee Med Ctr  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial)	State TN  C  Occupation CNO  Aggregate	Zip Code 37398	Date of Receipt  M M J J J Z D D 7  Transaction ID: SA11A1.6263  Amount of Each Receipt this Period  400.00
3.	Mark Poppell  Mailing Address 1615 Championship Blvc  City Franklin  FEC ID number of contributing federal political committee.  Name of Employer LifePoint Hospitals, Inc.  Receipt For: Primary General Other (specify)	State TN  C Occupation Reimburs	Zip Code 37064  n sement Director e Year-to-Date ▼ 315.00	Date of Receipt  M M J D D J Z D O 7  Transaction ID: SA11A1.6320  Amount of Each Receipt this Period  315.00
<b>C</b> .	Full Name (Last, First, Middle Initial) Edwin B. (Bennie) Rector  Mailing Address 205 Winward Court  City  Nashville  FEC ID number of contributing federal political committee.  Name of Employer LifePoint Hospitals, Inc.  Receipt For:  Primary General Other (specify)		Zip Code 37217 n sement Manager e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: SA11A1.6324  Amount of Each Receipt this Period  225.00
s	UBTOTAL of Receipts This Page (optional)			940.00
Т	OTAL This Period (last page this line number on	lv)	<b>)</b>	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 31 / 40				
ıт	EMIZED RECEIPTS		or each category of the	(check only one)				
"	EIVIIZED NECEIP I 3		Detailed Summary Page	X 11a				
			, 0	13 14 15 16 17				
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the nar	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.				
abla	NAME OF COMMITTEE (In Full)							
$\rangle$	LIFEPOINT HOSPITALS INC GOOD GO	VERNME	ENT FUND					
Α.				Date of Receipt				
	Mailing Address 1011 Country Club Drive			04 13 2007				
	City	State	Zip Code	Transaction ID: SA11A1.6264				
	<u>Martinsville</u>	VA	24112	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		1000.00				
	Momorial/Martinevilla	Occupation CEO	1					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼		1000.00					
В.	Full Name (Last, First, Middle Initial) Joseph Ross			Date of Receipt				
	Mailing Address 530 Everville Drive			0 4 1 7 2 0 0 7				
	City	State	Zip Code	Transaction ID: SA11A1.6420				
	Livingston	TN	38570	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		350.00				
	Livingston Regional Hospi-	Occupation CFO	1					
	tal Receipt For:		Year-to-Date ▼	_				
	Primary General	1.99.19		1				
	Other (specify) ▼		350.00					
<u> </u>	Full Name (Last, First, Middle Initial) Kathy Russell			Date of Receipt				
	Mailing Address 2152 Harrodsburg Road			M M / D D / Y Y Y Y Y O 7 O 5 O 7				
	City	State	Zip Code	Transaction ID: SA11A1.6216				
	Harrodsburg	KY	40330	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		400.00				
	Plugaraga Cammunity Hagni	Occupation CNO/Ris	n k Manager					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼					
	Other (specify) ▼		400.00					
[	UBTOTAL of Receipts This Page (optional)		_	1750.00				
டீ	ODITAL OF RECEIPES THIS Fage (optional)	•••••	······					

PAGE 32 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) A. Dorothy L. Sawyer Date of Receipt Mailing Address 4701 W Avenida Del Rey 0.4 2007 13 City Zip Code State Transaction ID: SA11A1.6266 Glendale 85310 ΑZ Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Havasu Regional Medical Occupation Administrator Center Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeff Seraphine Date of Receipt Mailing Address 256 Waitsboro Drive 0.4 24 2007 City Zip Code State Transaction ID: SA11A1.6196 Somerset KY 42503 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Lake Cumberland Regional Occupation CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) C. Cherie Sibley Date of Receipt Mailing Address 3 Wilkins Road 04 16 2007 City State Zip Code Transaction ID: SA11A1.6382 <u>Sel</u>ma ΑL Amount of Each Receipt this Period FEC ID number of contributing 400.00 C federal political committee. Name of Employer Vaughan Regional Med Ctr Occupation CNO Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 2400.00 SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

PAGE 33 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Wes Sigler Date of Receipt Mailing Address 111 Duncan Lane 0.4 17 2007 City State Zip Code Transaction ID: SA11A1.6426 Winchester ΤN 37398 Amount of Each Receipt this Period FEC ID number of contributing 400.00 C federal political committee. Name of Employer Southern TN Med Ctr Occupation COO Receipt For: Aggregate Year-to-Date 🔻 Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Chuck Spann Date of Receipt Mailing Address 702 Arrowhead Village 0.4 19 2007 City State Zip Code Transaction ID: SA11A1.6442 Winfield ΑL 35594 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Northwest Medical Center Occupation CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) C. William R. Spray Date of Receipt Mailing Address 70 Northfield Drive 0.4 13 2007 Citv State Zip Code Transaction ID: SA11A1.6268 Winchester TN 37398 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Southern Tennessee Med. Occupation CEO Ctr. Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1700.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 34 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Date of Receipt Roderick Stamps Mailing Address 114 Arrowood Drive 0.4 2007 24 City State Zip Code Transaction ID: SA11A1.6202 Hendersonville ΤN 37075 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer Lifepoint Hospitals, Inc. Occupation Division Controller Cont Div Aggregate Year-to-Date ▼ Receipt For: Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christine Stewart Date of Receipt Mailing Address 434 Grayland 17 0.4 2007 City Zip Code State Transaction ID: SA11A1.6421 Russellville ΑL 35653 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Name of Employer Russellville Hospital Occupation CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) C. Tommy Stoves Date of Receipt Mailing Address 613 Davis Drive 0.4 16 2007 Citv State Zip Code Transaction ID: SA11A1.6325 **Brentwood** TN 37027 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation Reimbursement Director Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional) .....

PAGE 35 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Date of Receipt Denise Thomas Mailing Address 255 N. Spalding Ave. 0.4 2007 24 City State Zip Code Transaction ID: SA11A1.6187 Lebanon KY 40033 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Spring View Hospital Occupation **CFO** Receipt For: Aggregate Year-to-Date ▼ General Primary 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. William Truex, Jr. Date of Receipt Mailing Address 902 Hunters Court 0.4 10 2007 City State Zip Code Transaction ID: SA11A1.6237 Franklin TN 37069 Amount of Each Receipt this Period FEC ID number of contributing C 375.00 federal political committee. Name of Employer LifePoint Hospitals, Inc. Occupation Director of IT Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) C. Timothy Vaughn Date of Receipt Mailing Address 588 Ironwood Place 0.4 10 2007 City Zip Code State Transaction ID: SA11A1.6238 Livingston TN Amount of Each Receipt this Period FEC ID number of contributing C 325.00 federal political committee. Name of Employer LifePoint Hospitals Occupation National Director Physician Services Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) 950.00 SUBTOTAL of Receipts This Page (optional) .....

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 36 / 40
	EMIZED RECEIPTS		or each category of the	(check only one)
••	EMIZED REGEN 10		Detailed Summary Page	X 11a 11b 11c 12
Δ.	by information conicd from such Benerte and St	otomonto moi	, not be eald ar used by any nare	13 14 15 16 17
or	ny information copied from such Reports and St for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$  \rangle$	LIFEPOINT HOSPITALS INC GOOD G	OVERNME	ENT FUND	
$\angle$				
Α.	Full Name (Last, First, Middle Initial) John Walker			Date of Receipt
Λ.	Mailing Address 2007 Hillpointe Way			M M / D D / Y Y Y Y
				04 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.6274
	Dodge City	KS	67801	Amount of Each Receipt this Period
	FEC ID number of contributing	С		1000.00
	federal political committee.			
	Name of Employer Western Plains Medical Co-	Occupation	n	
	mplex	CEO		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
	Other (specify)	0 0	0 0 0 0 0 0 0	1
_	Full Name (Last, First, Middle Initial)			
В.	,			Date of Receipt
	Mailing Address 8309 Trading Post Ct.			M M / D D / Y Y Y Y
	City	State	Zip Code	04 16 2007
	Nashville	TN	37221	Transaction ID: SA11A1.6329
	•		37221	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1500.00
		10		
	Name of Employer Lifepoint Hospitals, Inc.	Occupation Oivision (		
	Receipt For:		e Year-to-Date ▼	
	Primary General	33 - 3		7
	Other (specify) ▼		1500.00	
_				
C.	Full Name (Last, First, Middle Initial) Michael Wiechart			Date of Receipt
-	Mailing Address 317 Inwood Way			M M / D D / Y Y Y Y
				04 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.6292
	Franklin	TN	37064	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1500.00
	Name of Employer LifePoint Hospitals, Inc.	Occupation		
	Receipt For:	Division I	President e Year-to-Date ▼	$\dashv$
	Primary General	Aggregate	real-lo-Dale V	7
	Other (specify)		2500.00	
				4000.00
s	UBTOTAL of Receipts This Page (optional)			4000.00
1 T	<b>OTAL</b> This Period (last page this line number of	nıv)		

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 37 / 40
ıт	EMIZED RECEIPTS	or each category of the	(check only one)
••	LIVIIZED HEOLII 10	Detailed Summary Page	X   11a   11b   11c   12   15   16   17
Δr	y information copied from such Reports and Statements	may not be sold or used by any perso	
or	for commercial purposes, other than using the name and	d address of any political committee to	o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)		
$  \rangle$	LIFEPOINT HOSPITALS INC GOOD GOVERN	NMENT FUND	
$\angle$			
Α.	Full Name (Last, First, Middle Initial) James R. Williams, Jr		Date of Receipt
۸.	Mailing Address PO Box 4061		M M / D D / Y Y Y Y
	Walling 7 (60) 100 (60) 400 (7		04 10 2007
	City State	e Zip Code	Transaction ID: SA11A1.6239
	<u>Cleveland</u> MS	38732	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee		750.00
	federal political committee.		730.00
	Name of Employer Bolivar Medical Center	pation	
	Bolivar Medical Center CFO		
		egate Year-to-Date ▼	
	Primary General	750.00	1
	Other (specify) ▼		J
_	Full Name (Last, First, Middle Initial)		_
В.	J. Fred Wilson		Date of Receipt
	Mailing Address 2416 Healy Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Stat	e Zip Code	04 05 2007
	Lexington KY	40509	Transaction ID: SA11A1.6217
		40309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		400.00
	Name of Employer Bourbon Occup	pation	
	Receipt For: CFO  Aggre	egate Year-to-Date ▼	
	Primary General	egale Teal-10-Date V	1
	Other (specify)	400.00	
			4
_	Full Name (Last, First, Middle Initial)		B (B
Ċ.	Suzanne C. Woods		Date of Receipt
	Mailing Address 100 Jefferson Avenue		04 05 2007
	City State	e Zip Code	Transaction ID: SA11A1.6218
	Interlachen FL	32148	Amount of Each Receipt this Period
	FEC ID number of contributing		450.00
	federal political committee.		430.00
	Name of Employer Occup	pation	
	Name of Employer Putnam Community Medical Ctr.  Occup CNO		
		egate Year-to-Date ▼	
	Primary General	450.00	1
	Other (specify)	450.00	
	UBTOTAL of Receipts This Page (optional)		1600.00
$\vdash$	ODITIAL OF NECERPLS THIS FAGE (OPLICITAL)		
Ιт	OTAL This Period (last page this line number only)		

Lori Wooten

City

Franklin

Receipt For:

B. Phillip Young

**LaFayette** 

City

usas Receipt For:

### SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

FEC ID number of contributing

federal political committee.

Other (specify)

FEC ID number of contributing

federal political committee.

Name of Employer Doctors Hospital of Opelo-

Other (specify)

Primary

Full Name (Last, First, Middle Initial)

Mailing Address 100 McCord Drive

Name of Employer LifePoint Hospitals, Inc.

Primary

Mailing Address 261 Stonehaven Circle

General

General

TN

C

LA

C

Occupation CEO

Aggregate Year-to-Date ▼

1000.00

PAGE 38 / 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. LIFEPOINT HOSPITALS INC GOOD GOVERNMENT FUND Date of Receipt 0.4 24 2007 State Zip Code Transaction ID: SA11A1.6201 37064 Amount of Each Receipt this Period 500.00 Occupation **Operations Controller** Aggregate Year-to-Date ▼ 500.00 Date of Receipt 0.4 13 2007 Zip Code State Transaction ID: SA11A1.6276 70508 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1500.00
TOTAL This Period (last page this line number only)	<b>•</b>	68806.00

_				
S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 39 / 40
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onl	y one)  22
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam			
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	LIFEPOINT HOSPITALS INC GOOD GOV	ERNMENT FUND		
	Full Name (Last, First, Middle Initial)			Transaction ID: SB23.6447
٩.	FRIENDS OF JAY ROCKEFELLER			Date of Disbursement
	Mailing Address PO BOX 1909			04 4 0 5 7 2 0 0 7
	City CHARLESTON	State Zip Code WV 25327		Amount of Each Disbursement this Period
	Purpose of Disbursement fundraiser			5000.00
	Candidate Name FRIENDS OF JAY ROCKEFELLER		Category/ Type	
	Office Sought:    House   Disburse     X Senate     President     State: WV   District: 00	ement For: Primary General Other (specify)		
	STATE AND THE HIGH OUT I			1

SUBTOTAL of Disbursements This Page (optional)	<b>&gt;</b>	5000.00
TOTAL This Period (last page this line number only)	<b>•</b>	5000.00

9	CHEDIII E D /EEC Form 2V					
	CHEDULE B (FEC Form 3X)		ate schedule(s)	FOR LINE (check only		PAGE 40 / 40
ΙT	EMIZED DISBURSEMENTS		ategory of the	21b	7 011e) □ 22   □ 23   □ 24	□ 25 □ 26
		Detailed S	ummary Page		$-\frac{22}{28a}$ $-\frac{23}{28b}$ $-\frac{24}{28}$	
An	y Information copied from such Reports and Staten	nents may not	be sold or used			
	or commercial purposes, other than using the nam					
Λ	NAME OF COMMITTEE (In Full)					
	LIFEPOINT HOSPITALS INC GOOD GOV	/ERNMENT	FUND			
$\mathbb{L}$						
	Full Name (Last, First, Middle Initial)				Transaction ID: SB29	.6451
Α.	Friends of TN Hospital Association				Date of Disbursement	
	Moiling Address 500 Lt Lt. DL LO				04 05	2007
	Mailing Address 500 Interstate Blvd S				0 4 0 0	2007
	City	State	Zip Code		Amount of Each Disbur	sement this Period
	Nashville	TN	37210			
	Purpose of Disbursement					1210.00
	fundraiser					
	Candidate Name			Category/		
				Туре		
		ement For:				
	Senate	Primary	General			
	President	Other (spec	eity) 🔻			
	State: District:					
В.	Full Name (Last, First, Middle Initial)				Transaction ID: SB29	.6449
٥.	LHA HOSPAC				Date of Disbursement	
	Mailing Address 9521 Brookline Avenue				04 05	<sup>°</sup> 2 0 0 7 °
	City	State	Zip Code		Amount of Each Disbur	sement this Period
	Baton Rouge	LA	71055			5000.00
	Purpose of Disbursement					5000.00
	fundraiser					
	Candidate Name			Category/		
	Office Cought: House Dishurs	amont For		Туре		
	Office Sought: House Disburse Senate	ement For: Primary	General			
	President	Other (spec				
	State: District:	_ Strict (spec	<b>J</b> / ▼			

1		
SUBTOTAL of Disbursements This Page (optional)	<u> </u>	6210.00
TOTAL This Period (last page this line number only)	•	6210.00